

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1880, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Blanco Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Cody Energy, Inc.	Well API No.	30-025-25053
Address	16825 Northchase Dr., Suite 1200, Houston, TX 77060-6080		
Reason(s) for Filing (Check proper box)	Other (Please explain)		
New Well	☐	Change in Transporter of:	
Recompletion	☐	Oil	☐ Dry Gas ☐
Change in Operator	☒	Conventional Gas	☐ Condensate ☐
If change of operator give name and address of previous operator	Williams-Cody, Inc. (same as above)		

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Shipp 34 A	1	Casey (Strawn)	State, Federal or Fee	Fee
Location	Unit Letter C : 1980 Feet From The West Line and 660 Feet From The North Line			
Section	Township	Range	Lea	County
34	16-S	37-E	NMNM	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil	☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)				
Texaco Trading & Transportation		P.O. Box 1295 - Midland, TX 79702				
Name of Authorized Transporter of Conventional Gas	☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)				
J.L. Davis		P.O. Box 3179 - Midland, TX 79702				
If well produces oil or liquids, give location of tanks	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
	C	34	16-S	37-E	Yes	09-03-75

If this production is commingled with that from any other lease or pool, give commingling order number.

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same as v	Diff. as v
Date Spudded	Date Complet. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of lead oil and must be equal to or exceed test allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Flowing Method (pump, rock jet, etc.)	Tubing Pressure (Static-in)	Casing Pressure (Static-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Jo Ann Curtis
Signature
Jo Ann Curtis, Supervisor Prod./Regulatory
Printed Name
06-14-93 (713) 875-8701
Date Telephone No.

OIL CONSERVATION DIVISION
JUN 30 1993

Date Approved _____

By _____ Orig. Signed by
Paul Kautz
Geologist

Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.